



## PART B—ISSUE FEE TRANSMITTAL

Box ISSUE FEE  
Assistant Commissioner for Patents  
Washington, D.C. 20231#30  
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3-7-02  
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

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## Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Judith K. Sherman

(Depositor's name)

*Judith K. Sherman*

(Signature)

January 18, 2002

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/882,415	06/25/97	007	GARCIA, M	1627 10/26/01
First Named Applicant	ZHANG,	35 USC 154(b) term ext. = 0 Days.		

TITLE OF INVENTION SELF-ASSEMBLING PEPTIDE SURFACES FOR CELL PATTERNING AND INTERACTIONS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 MIT-7762 0050.1587-000	436-527.000	005	UTILITY	NO	\$1280.00	01/28/02

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Hamilton, Brook, Smith &amp; Reynolds, P.C.

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  
**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

1. Massachusetts Institute of Technology

(A) NAME OF ASSIGNEE  
2. President and Fellows of Harvard College

(B) RESIDENCE: (CITY &amp; STATE OR COUNTRY) Cambridge, Massachusetts for both

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ Individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee☒ Advance Order - # of Copies 15

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 08-0380  
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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

1/18/02

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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02/21/2002 HUI002 00000142 08082415  
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01 FEB 14 2002  
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